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Title of	Invention	SYSTE	EM AND PRO	CESS F	OR FACIL	LITATING	G THE	PROVIS	SION O	F HE	EALTH CA	ARE		
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Applic	ant Authorit	y • Inv	ventor OL	egal Re	presentati	ve under	35 L	J.S.C. 11	7	ОР	arty of Int	erest und	der 35 U	J.S.C. 118
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	MICHAEL				DAVID				BUIS	ST.	T			
Resid	ence Inform	ation (S	Select One)	O US	S Residence	су 🧿) No	n US Res	sidency	' (Active	US Milit	ary Serv	rice
City														
Citizer	nship under	37 CFR	R 1.41(b) ⁱ	AU										
Mailing	g Address o	f Applic	cant:											
Addre	ss 1	1	6 Ethel Stree	t										
Addre	ss 2													
City	Malvern	, Victoria	a				State	e/Provin	ice					
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Custo	mer Number		22885											
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Title o	f the Inventi	on	SYSTEM A	ND PR	OCESS FO	OR FAC	ILITA	TING THE	E PRO	VISIO	ON OF HE	ALTH C	ARE	
Attorney Docket Number							Sı	nall Ent	ity Sta	atus	Claimed	i 🗸		
Application Type Nonprovisional			onal											
Subjec	ct Matter		Utility											
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Application Data Sheet 37 CFR 1.76									
Application Data 3	ileet 37 Cl K 1.70	n Number							
Title of Invention SYSTEM AND PROCESS FOR FACILITATING THE PROVISION OF HEALTH CARE									
Publication Information:									
Request Early Publication (Fee required at time of Request 37 CFR 1.219)									
Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.									
Representative Information:									
Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.									
Please Select One:	Customer Number	O US	Patent Practitioner	O US	Representat	tive (37 CFR 11.9)			
Customer Number	22885								
Domestic Priority Information: This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a) (4), and need not otherwise be made part of the specification.									
Prior Application Stat		modulori.			Rer	move			
Application Number	Continuity T	vpe	Prior Application Number Filing Date (YYYY-						
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Additional Domestic Priority Data may be generated within this form by selecting the Add button.									
Foreign Priority I	nformation:								
This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).									
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Application Number Count		i 	,			Priority Claime			
PCT/AU2004/001499 AU			2004-10-29			Yes No			
Additional Foreign Priority Data may be generated within this form by selecting the Add button.									
Assignee Information:									
Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.									
Assignee 1					Rer	nove			
If the Assignee is an Organization check here. ✓									

PTO/SB/14 (08-05) Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Application Da	ıta She	eet 37 CFR 1.76	Attorney Docket Number						
Application Be	ita One	01 11 11.70	Application Number						
Title of Invention	SYSTI	EM AND PROCESS FO	FOR FACILITATING THE PROVISION OF HEALTH CARE						
Organization Name P		ATIENTRACK PTY LTD.							
Mailing Address Information:									
Address 1		P. O. Box 119							
Address 2									
City		Armadale, Victoria	State/Provin	се					
Country CA			Postal Code	3143					
Phone Number			Fax Number						
Email Address			·						
Additional Assignee Data may be generated within this form by selecting the Add button.									

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.										
Signature Date (YYYY-MM-DD)										
First Name	MARSH	Last Name	WENDY	Registration Number	39,705					

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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- 6. A record in this system of records may be disclosed, as a routine use, to another federal agency for purposes of National Security review (35 U.S.C. 181) and for review pursuant to the Atomic Energy Act (42 U.S.C. 218(c)).
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